Fill in this information	on to identify your case:	
Debtor 1	Charles P. Simon	_
Debtor 2 (Spouse, if filing)	Patricia M. Simon	_
United States Bankı	ruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
Case number (If known)	19-17669-AMC	Check if this is: An amended filing
Official For	m 106l	A supplement showing postpetition chapter 13 income as of the following date:

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
If you have more than one job,	Employment status	☐ Employed	☐ Employed
attach a separate page with information about additional		■ Not employed	■ Not employed
employers.	Occupation	Retired	Retired
Include part-time, seasonal, or self-employed work.	Employer's name		
Occupation may include student or homemaker, if it applies.	Employer's address		
	How long employed the	here?	

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 0.00 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106l Schedule I: Your Income page 1

Debtor 1 Debtor 2		Charles P. Simon Patricia M. Simon			Case number (if known)			19-17669-AMC			
Copy		y line 4 here			For Debtor 1			For Debtor 2 or non-filing spouse \$ 0.0			
	•	·			· —		<u> </u>	· —		0.00	_
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$		0.00	\$_		0.00	_
	5b.	Mandatory contributions for retirement plans	5b		\$		0.00	\$_		0.00	_
	5c.	Voluntary contributions for retirement plans	5c		\$		0.00	\$_		0.00	_
	5d.	Required repayments of retirement fund loans	5d		\$ \$		0.00	\$_		0.00	_
	5e. 5f.	Insurance Domestic support obligations	5e 5f.		\$ 		0.00	\$_ \$		0.00	_
	5g.	Union dues	5g		\$ 		0.00	\$_		0.00	_
	5h.	Other deductions. Specify:	5h		\$		0.00	· · ·		0.00	_
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$		0.00	\$		0.00	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	\$		0.00	
8.	8b. 8c. 8d. 8e. 8f. 8g. 8h.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filling spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: 2018 Proportionate Tax Refund	8c 8d 8e). 	\$ \$ \$ \$	2,39	0.00 0.00	\$	·	0.00 0.00 0.00 0.00 454.20 0.00 251.85 0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$.	2,91	4.58	\$_	3	3,706.0	5
10.	Cal	culate monthly income. Add line 7 + line 9.	10.	\$	2	2,914.58	+ \$	3,	706.05	= \$	6,620.63
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					I L				
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in <i>Schedu</i> ude contributions from an unmarried partner, members of your household, you or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are notify:	ur depe			•		•	Schedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The ree that amount on the Summary of Schedules and Statistical Summary of Certiles							12.	\$	6,620.63
13.	Do :	you expect an increase or decrease within the year after you file this for No.	m?							Combi month	ned ly income
		Yes. Explain: TSP is set to stop in 1.5 years.									

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